VDH Vaccine Advisory Group Minutes				
<b>Date:</b> 09/28/2020	<b>Time:</b> 12:30 PM	Location: Google Meet meet.google.com/vti-zaaa-gwg Phone: 1 910-939-8631; 816827198#	Facilitator: Kelly Goode Scribe: Stephanie Wheawill	
Topic	Meeting Discussion / Chat Dialogue			
Welcome	Kelly and Christy opened the call.  Christy introduced the external member Co-Chair of the Vaccine Advisory Workgroup:     Kelly Goode, PharmD, BCPS, FAPhA, FCCP     Professor and Director, Community-Based Residency Program     Virginia Commonwealth University School of Pharmacy     President, Virginia Pharmacists Association     Former President, American Pharmacists Association  Kelly will help facilitate the larger workgroup meetings. Kelly's contact information is kellygoode@verizon.net  Kelly acknowledged new members who have joined us and asked that everyone review the updated membership roster for completeness and accuracy.			
Federal and State Updates: ACIP Meeting Sept. 22	Christy provided information regarding Advisory Committee on Immunization Practices (ACIP) for CDC Meeting on 9/22/2020:  ACIP COVID-19 Vaccines Work Group Update Phase III trials  Moderna: enrolled 25,296 participants as of 9/16/2020  28% of participants are enrolled from "diverse communities"  Pfizer: enrolled 31,928 participants as of 9/21/2020  26% of participants are from "diverse backgrounds"  ACIP Work Group will conduct an independent review of safety and efficacy data  If/when FDA decision is announced, ACIP will hold an "emergency" meeting with public comment session, and then will vote on recommendations for vaccine and populations for use.  Vaccine safety is a huge priority for the ACIP, CDC, and VDH. There will be multiple systems in place to monitor vaccine safety. A specific subgroup under the ACIP has been set up to monitor and track vaccine adverse events. They will also be using a new system, called V-SAFE to contact vaccine recipients and obtain direct feedback on their experiences. V-SAFE will work in conjunction with VAERS.  New Vaccine Safety Mechanisms  New Monitoring ACIP COVID-19 Vaccine Safety Technical (VaST) Subgroup  Specifically dedicated to COVID-19 vaccine safety  Will track "adverse events of special interest (AESI):  egeneral adverse events,  adverse events that are vaccine-specific (mRNA, viral vector, adjuvanted, etc.),			

- population-specific adverse events (children, pregnant women, co-morbidities, elderly, etc.)
- A new system, V-SAFE, will provide enhanced safety monitoring for COVID-19 vaccine for essential workers in early phase vaccination
  - V-SAFE will do smartphone-based text, text-to-web survey, email-to-web survey for early
    vaccine recipients and will send daily check-in messages for 1 week post-vaccination, and
    then weekly check-in messages for 6 weeks post-vaccination
  - V-SAFE will use contact information from COVID-19 vaccination registration for essential workers (uncertain where registration data will come from).
  - From V-SAFE, any adverse events will then be reported to VAERS

Final priority groups will not be decided until AFTER a vaccine has been approved for use, the ACIP has provided the Phase 1a and Phase 1b priority groups for us to use for planning purposes. Again, this is not the final list.

Additionally, it is possible that we will not complete immunization of all Phase 1a and 1b group members before there is adequate vaccine supply to move to Phase 2. Conversely, it is also possible that vaccine will continue to be available only in limited supply for several months. Therefore, we must ensure that we are ready for both scenarios.

When considering Phase 1a personnel – this would include all Nursing Home and Assisted Living Facility staff and employees (to include housekeeping, dietary, and other employees). However, residents during phase 1b, LTCFs that can receive, store and administer vaccine to their residents will get direct shipments of vaccine. However, the Phase 1a details are still being worked out.

Overview of WHO, Johns Hopkins University, and National Academies of Science, Engineering, and Medicine (NASEM) Prioritization Frameworks

### Phase 1 Allocation COVID-19 vaccine: Work Group Considerations – Possible Groups

- Phase 1a: Healthcare personnel (~20 million)
- Phase 1b:
  - Essential Workers (not HCP) (~60 mill)
  - High Risk Medical Conditions (>100 mill)
  - Adults >65 yo (~53 mill)

Christy acknowledged that that National Vaccine Advisory Committee (NVAC) for HHS met on 9/23/2020 and 9/24/2020. Kelly serves as a liaison representative to this group.

Topics discussed within this meeting included:

- Serving Up Equity: Health-In-All Approaches for COVID-19 Vaccination
- Allocation and Prioritization: Considerations and Recommendations for the Distribution of COVID-19 Vaccines
- Perspectives from the Field: Operation Warp Speed
- Vaccine Confidence Subcommittee Update, Discussion, and Vote
- The Infodemic, COVID-19 Immunization, and the Public's Health
- Immunization Information Systems to Support the COVID-19 Response
- COVID-19 Charge Discussion
- Progress in Using Vaccines to Prevent Superbugs
- Now More Than Ever: Flu Vaccination During COVID-19
- Overdue Immunization: Getting Back on Track

# Federal and State Updates: NVAC Meeting Sept. 23-24

	<ul> <li>Evidence and Equity: What Works to Decrease Disparities in Immunization</li> <li>Federal Agency and Liaison Representative Updates</li> </ul>		
Federal and State Updates: NGA and NCSL Meeting Sept. 25	Christy shared that she attended the National Governors Association (NGA)/National Council of State Legislatures (NCSL) Meeting on 9/25/2020.		
	State policy leaders from 37 jurisdictions discussed policy and planning considerations for distribution of a forthcoming COVID-19 vaccine, strategies for strengthening seasonal and routine childhood vaccine efforts to prevent outbreaks and protect health system capacity, crisis management as well as strategies for addressing vaccine hesitancy, combatting misinformation, and engaging at-risk and vulnerable communities.		
	Three of the five states that have been working with the CDC on microplanning discussed their experience. Virginia was not an initial state that participated in microplanning.		
Federal and State Updates: CDC Playbook	The Department of Health and Human Services and the Department of Defense, as part of Operation Warp Speed, issued a press release on 9/16/2020 about the COVID-19 Vaccination Program Interim Playbook and the Strategy for Distributing a COVID-19 Vaccine. Both documents are available online and attached. The press release can be found at <a href="https://www.hhs.gov/about/news/2020/09/16/trump-administration-releases-covid-19-vaccine-distribution-strategy.html">https://www.hhs.gov/about/news/2020/09/16/trump-administration-releases-covid-19-vaccine-distribution-strategy.html</a> .		
	Christy shared that the <b>State Vaccination Distribution Plan Development must be submitted to the CDC project officer by October 16.</b> The plan will address all requirements outlined in the Interim Playbook and clearly describe who is responsible for ensuring activities are implemented. VDH will be working with a way to share this living document to the Vaccine Advisory Workgroup. The CDC is not approving this document but will use this to provide states technical assistance and support.		
Federal and State Updates: Reporting Data Element Dictionary	Information was published and can be viewed at: <a href="https://www.cdc.gov/coronavirus/2019-ncov/downloads/data-dictionary.pdf">https://www.cdc.gov/coronavirus/2019-ncov/downloads/data-dictionary.pdf</a>		
Federal and State Updates: Provider Agreement and Profile	VDH has drafted a <i>COVID-19 Vaccine Provider Intent Form</i> to be sent out around the beginning of October. This form is used to indicate intent, not obligate, providers or facilities interested in administering COVID-19 vaccine to patients and/or staff. Information collected will allow VDH to set up necessary accounts for vaccine ordering and reporting. Providers interested in committing to administering COVID-19 vaccine will need to complete the CDC COVID-19 Vaccination Program Provider Agreement and Profile. More information will be forthcoming and directions will be provided to those that complete the <i>COVID-19 Vaccine Provider Intent Form</i> .		
Federal and State Updates: Operation Warp Speed	Operation Warp Speed (OWS) aims to deliver 300 million doses of a safe, effective vaccine for COVID-19 by January 2021, as part of a broader strategy to accelerate the development, manufacturing, and distribution of COVID-19 vaccines, therapeutics, and diagnostics (collectively known as countermeasures).		

Operation Warp Speed has developed a infographic which is available at: https://media.defense.gov/2020/Sep/16/2002498504/-1/-1/1/OWS-VACCINE-DISTRIBUTION-GRAPHIC.pdf **TRIALS** MANUFACTURING MANUFACTURER OWS & CDC Based on data from clinical trials, Vaccine is being manufactured Allocation of initial/limited doses will be based on CDC prioritization models concurrent with clinical trials. vaccine candidate is submitted for Emergency Use Authorization (EUA) and upon FUA/BLA and CDC Independent advisory panel (Advisory Committee on or Biologics License Application recommendation, vaccine is Immunization Practices with input from Nat'l ready to ship Academies of Science) informs CDC prioritization Reviews EUA/BLA application · Initial/limited doses will be allocated for Approves EUA/BLA application specific groups Oversees ongoing reporting Oversees distribution of vaccine Pharmacovigilance o Tracks product that is delivered/administered ADMINISTRATION SITES DISTRIBUTION FACILITIES DISTRIBUTOR Vaccines, upon EUA/BLA, are ready to Vaccines & associated ancillary · Maximize use of existing pharmaceutical shin to: kits (syringes, needles, and distribution infrastructure · Pharmacies alcohol swabs) will be shipped · Central Distributor established for kitting · Nursing homes concurrently to distribution & distribution operations depots and facilities · Public Clinics Hospitals IT infrastructure supports ordering, · Doctor's offices and Mobile Clinics distribution, administration, and tracking end-to-end · Military Treatment Facilities PHARMACOVIGILANCE (FDA & CDC) 24 month post trial monitoring for adverse effects/additional safety feature Update on Influenza Campaign: Identika is the communications vendor. Targeting mid-October to begin rolling out campaign materials. State Vaccination Plan - Initial Draft State, Date Due to CDC 10-16-2020 - See above VDH COVID-19 Vaccine Provider Intent Form - See above VIIS Onboarding Guide: Vaccinators will be asked to report all doses administered through the Virginia Immunization Information System (VIIS), the state's immunization registry. Providers not already enrolled in VIIS can learn more about the benefits of VIIS and how to enroll here. Providers can connect their electronic medical records system directly to VIIS. Providers **Specific State Updates** also can directly enter doses administered into the VIIS website. Population Group Estimates and Update of Current Data/Surveys: We have sent information to the local health districts and are working with VHHA to survey hospitals, adult living facilities, etc. Planned tabletop exercise for October: The purpose of this table top exercise is to identify gaps in vaccine distribution/administration. Overview of a simplified listed of COVID-19 Vaccine Steps were established in order to create the Vaccine Advisory Workgroup timeline Charter Expectations: please review

- Cadence of Meetings: every 3 weeks instead of every 2 weeks (allowing subgroups to meet in between)

#### Member Listing

- Tentative Timeline and Steps were provided for overview

The subcommittees will be asked to meet at least once between each large workgroup meeting. Notes will be due back to Stephanie Wheawill and Christy Gray by COB on the Tuesday prior to the large workgroup meeting.

## Barriers to Vaccination Initial Meeting: Oct. 5 at 12:30pm

#### Co-Chairs:

Carolyn Moneymaker, MD (Immunize Virginia)

Stuart Henochowicz, MD, MBA, FACP (American College of Physicians)

Identify strategies, needs and obstacles for public and private providers in order to assist in administering COVID-19 vaccine.

Identify populations outside of CDC critical populations that need to be considered within Virginia.

# Safety and Efficacy Initial Meeting: Sept. 29 at 11am

### **Co-Chairs:**

Costi Sifri, MD, FACP FIDSA (University of Virginia School of Medicine and University of Virginia Medical System)

Joshua Crawford, PharmD, BCPS (Bon Secours Mercy Health)

Review data from COVID-19 trials provided through the Food and Drug Administration and Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices (ACIP) regarding the safety and efficacy of COVID-19 vaccine candidates.

### Partnerships Initial Meeting: October 6 at 2pm

#### **Co-Chairs:**

Sean Connaughton (Virginia Hospital & Healthcare Association)

April Payne, MBA, LNHA (Virginia Center for Assisted Living. Quality Improvement)

Identify and help establish partnerships with trusted community organizations in order to facilitate communication channels, methods for rapidly disseminating information and ensuring that critical populations have access to the vaccination.

Establish points of contact (POCs) for specific organizations within the community who may serve as partner and trusted sources within the community and critical population groups.

This will include staff of COVID Health Equity workgroup.

### Communications and Messaging Initial Meeting: Oct 6 at 9am

#### **Co-Chairs:**

Gaylene Kanoyton (Celebrate Healthcare)

Wendy Klein, MD, MACP (Health Brigade)

Vet messaging of COVID-19 vaccine to the population, including identifying key audiences, effective communication activities, and messaging considerations such as risk/crisis response communication messaging and delivery.

This will include staff of COVID Health Equity workgroup.

### **Action Steps**

- Resend the timeline
- Send out sub-workgroup meeting dates and updated membership roster

Reach out to additional members, ensuring Hispanic and Latino representation/CBOs,
Hispanic-Latino media, rural health centers, tribes, grassroots orgs in Black communities,
Urban League, diverse faith communities and networks at state level (e.g. Baptist General
Convention), HBCUs
 Develop a process for pharmacies to enroll with states, including chain pharmacies with a
large amount of stores in the state
 Add the following to our questions for CDC:

 Employees who cross jurisdictions: Will they be able to vaccinated in most convenient
jurisdiction vs. state of residence?
 Sub-workgroups should send an overview of needs and goals by Oct. 13 COB

# **Meeting Schedule**

The large group will next meet on Monday, October 19 from 12:30-1:30 pm. The agenda will be distributed by Thursday, October 15 COB.